

**Arizona Department of Revenue • Bankruptcy/Litigation**

PO Box 29070 • Phoenix, AZ 85038-9070

Telephone: (602) 716-6785

**TAX CLEARANCE APPLICATION****1. Applicant Information:**

APPLICANT NAME

DAYTIME TELEPHONE NUMBER

STREET ADDRESS

CITY

STATE

ZIP CODE

**2. Tax Clearance Purpose:** *Check only one box.*

CERTIFICATE OF COMPLIANCE FOR DISSOLUTION OR WITHDRAWAL:

☐ Dissolution of Corporation (not applicable to estate, trust, or individual application types)☐ Withdrawal from Arizona (not applicable to estate, trust, or individual application types)

LETTER OF GOOD STANDING:

☐ Sale of Business☐ Personal☐ Residency☐ Other: \_\_\_\_\_**3. Application Type:** *Check only one box and provide tax identification number(s).*☐ Corporation Federal Employer I.D. No.☐ S Corporation OR☐ Partnership AZ Transaction Privilege License No.☐ Tax Exempt Organization OR☐ Limited Liability Company AZ Withholding Tax License No.☐ Limited Liability Partnership☐ Estate Social Security No.☐ Trust OR☐ Individual AZ Transaction Privilege License No.

OR

AZ Withholding Tax License No.

**4. Signature**

PRINT NAME

PRINT SPECIFIC TITLE (Corporate Officer, Partner, Individual)

SIGNATURE

DATE

**5. Mail application to:** Arizona Department of Revenue, Bankruptcy/Litigation, PO Box 29070, Phoenix, AZ, 85038-9070. *Be sure to sign the application. Unsigned applications will not be processed. Do not fax the application. Faxed applications will not be processed.*

POWER OF ATTORNEY: If this application is submitted by anyone other than a corporate officer, general partner, or individual (sole proprietor), Arizona Form 285, *General Disclosure/Representation Authorization Form*, is required. Visit our web site at <http://www.azdor.gov> and click on the *Tax Forms* link to obtain Form 285.